FORM (RF-3)

Change in Company's premium or ra	te level produced by rate revision
effective 01/03/2015	

-	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois) *	Change (+or-) **
1.	Automobile Liability Private Passenger		_
^	Commercial		
2	Automobile Physical Damag Private Passenger		•
2	Commercial	140,004	
3.	Liability Other Than Auto	142,801	10.0%
4.	Burglary and Theft		
5.	Glass		
6. 7	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9. 10.	Fire		
10.	Extended Coverage Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.			
15.	Crop Hail Other		
15.	Line of Insurance		
•	Line of insurance		
•	Does filing only apply to certain Classes? If so,	n territory (territories) or	certain
	specify: Applies to	o all Territories	
		· · · · · · · · · · · · · · · · · · ·	
	Brief description of filing. (If find Organization, specify organization):	·	•
	organization):	Overali rate increase, addition	on of lower underlying Bodily Injury limits,
	implementing new watercraft rate table		
	*Adjusted to reflect all prior ra **Change in Company's prem rates.		t from application of new
		Allied Property and	Casualty Insurance Company
		Nar	ne of Company
		Andrew Spisak - Sr.	· •
			Official – Title

1.

2

3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13.

15. Other

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision.

| effective 01/03/2015 | : | |
|------------------------------|-----------------------|------------------|
| (1) | (2)
Annual Premium | (3)
Percent |
| Coverage - | Volume (Illinois) * | Change (+or-) ** |
| Automobile Liability Private | | |
| Passenger | | |
| Commercial | | |
| Automobile Physical Damag | | |
| Private Passenger | | |
| Commercial | | |
| Liability Other Than Auto | 701,962 | 10.0% |
| Burglary and Theft | | |
| Glass | | |
| Fidelity | | |
| Surety | | |
| Boiler and Machinery | | |
| Fire | | |
| Extended Coverage | | |
| Inland Marine | <u></u> | |
| Homeowners | | · |
| Commercial Multi-Peril | | • |
| Crop Hail | | |

Line of Insurance

| Does filing only apply to certain territory (territories) or certain | | | | |
|--|----------------------------|--|--|--|
| Classes? If so, | | | | |
| specify: | Applies to all Territories | | | |

Brief description of filing. (If filing follows rates of an advisory
Organization, specify
organization):

Overall rate increase, addition of lower underlying Bodily Injury limits,
implementing new watercraft rate table

AMCO Insurance Company

Name of Company

Andrew Spisak - Sr. Pricing Analyst

Official – Title

^{*}Adjusted to reflect all prior rate changes. . .

^{**}Change in Company's premium level which will result from application of new rates.

| | | level produced by rate revision effective | 05/01/2015 |
|--------------|--|--|--------------------------|
| | (1) | (2)
Annual Premium | (3)
Percent |
| | Coverage | Volume (Illinois)* | <u>Change (+ or -)**</u> |
| 1. | Automobile Liability Private Passenger | | |
| 2. | Commercial Automobile Physical Damage Private Passenger | | |
| 3. | Commercial Liability Other Than Auto | 1,729,964 | -0.8 |
|
4. | Burglary and Theft | | |
| 5. | Glass | | |
| 5. | Fidelity | | |
| 7. | Surety | | |
| 3. | Boiler and Machinery | | |
| €. | Fire | | |
|). | Extended Coverage | | |
| ۱. | Inland Marine | | |
| 2. | Homeowners | | |
| 3. | Commercial Multi-Peril | | |
| ł.
- | Crop Hail | | |
| 5. | Other Line of Insurance | | |
| | ling only apply to certain territory (terri | itories) or certain classes? If so, specify: | |
| No
rief d | escription of filing. (If filing follows ra | • | |
| we ' | escription of filing. (If filing follows ra | ates of an advisory organization, specify on the state of | |
| we ' | escription of filing. (If filing follows rawish to adopt ISO's General Liable to reflect all prior rate changes. | ates of an advisory organization, specify of specify to sility Loss Cost, ILF & revisted LC ch will | |

| (| Change in Company's premium or rate | level produced by rate revision effective | 05/01/2015 |
|------------|--|--|---|
| | (1) <u>Coverage</u> | (2) Annual Premium Volume (Illingis)* | (3) Percent <u>Change (+ or -)**</u> |
| 1. | Automobile Liability Private Passenger | | |
| 2. | Commercial Automobile Physical Damage Private Passenger Commercial | | |
| 3. | Liability Other Than Auto | 532,010 | 0.1 |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| 10. | Extended Coverage | | |
| 11.
12. | Inland Marine Homeowners | | |
| 12. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other | | |
| | Line of Insurance | | |
| | | | |
| | iling only apply to certain territory (terr | ritories) or certain classes? If so, specify | y: |
| No | | | |
| | | | |
| | | ates of an advisory organization, specify pility Loss Cost, ILF & revisted I | |
| | | | |
| | djusted to reflect all prior rate changes. | 1 -:11 | |
| | hange in Company's premium level whi | cn will | |
| 16 | sult from application of new rates. | | |
| | | | |
| | | As | sociated Indemnity Corp. Name of Company |
| | | | liam Paukovitz,
. Compliance
Official - Title |

FORM (RF-3)

| Change in Company's premium or | rate level produced by rate revision |
|--------------------------------|--------------------------------------|
| effective 01/03/2015 | |

| - | (1) | (2) .
Annual Premium | (3)
Percent | |
|-----|---|-------------------------------|--|--|
| 1 | Coverage - | Volume (Illinois) * | Change (+or-) ** | |
| 1. | Automobile Liability Private Passenger | | | |
| | Commercial | | | |
| 2 | Automobile Physical Damag | | | |
| _ | Private Passenger | | • | |
| | Commercial | | | |
| 3. | Liability Other Than Auto | 49,602 | 10.0% | |
| 4. | Burglary and Theft | 10,002 | 10.070 | |
| 5. | Glass | | | |
| 6. | Fidelity | | | |
| 7 | Surety | | | |
| 8. | Boiler and Machinery | | | |
| 9. | Fire | | | |
| 10. | Extended Coverage | | | |
| 11. | Inland Marine | | | |
| 12. | Homeowners | | | |
| 13. | Commercial Multi-Peril | | | |
| 14. | Crop Hail | | | |
| 15. | Other | | | |
| | Line of Insurance | | | |
| • | Does filing only apply to certain Classes? If so, | in territory (territories) or | certain | |
| | specify: Applies to | o all Territories | | |
| | | | | |
| | Brief description of filing. (If filing follows rates of an advisory | | | |
| | Organization, specify | | | |
| | organization): | Overall rate increase, additi | on of lower underlying Bodily Injury limits, | |
| | implementing new watercraft rate table | | | |
| | | | | |
| | *Adjusted to reflect all prior ra
**Change in Company's prem
rates. | | It from application of new | |
| | rates. | Depositors Insuran | ice Company | |
| | | | me of Company | |
| | | Andrew Spisak - Sr. | | |
| | | | Official - Title | |

| Change in Company's premium or rate | e level produced by rate revision effective | May 1, 2015 |
|---|--|--------------------------------|
| | | |
| (1) | (2) | (3) |
| _ | Annual Premium | Percent |
| Coverage | Volume (Illinois)* | Change (+ or -)** |
| 1. Automobile Liability | | |
| Commercial | | |
| 2. Automobile Physical Damage | | |
| Commercial | | |
| 3. Liability Other Than Auto | \$630,130 | +9.1% |
| 4. Burglary and Theft | | - |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | ······································ | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | · |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other | | |
| Line of Insurance | | |
| | | |
| Does filing only apply to certain territo | ory (territories) or certain classes? If so, speci | fy: |
| All territories and classes | | |
| | | |
| | llows rates of an advisory organization, specify | |
| Adopt ISO loss costs (circular GL- | 2014-115) and revise loss cost multipliers with | an effective date of 5/1/2015. |
| | • | |
| | | |
| | | |
| *Adjusted to reflect all prior rate chan | | |
| ** Change in Company's premium lev | el which will result from application of new rat | es. |
| | | • |
| | | surance Company of Wausau |
| | | Name of Company |
| | Tammy Dala | nbach, Product Technician II |
| | Tailiny Fail | Official - Title |
| | | Official - Fisc |

| | Inange in Company's premium or rate | level produced by rate revision effective | 05/01/2015 |
|--------------------------------|---|--|---|
| | (1) | (2)
Annual Premium | (3)
Percent |
| | Coverage | Volume (Illinois)* | <u>Change (+ or -)**</u> |
| 1. | Automobile Liability Private Passenger | | |
| | Commercial | | |
| 2. | Automobile Physical Damage
Private Passenger | | |
| 2 | Commercial | 276 922 | 0.907 |
| 3. | Liability Other Than Auto | 276,832 | 0.8% |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| 10. | Extended Coverage | | |
| 11. | Inland Marine | | |
| 12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 1 = | Other | | |
| 15. | Line of Insurance | | |
| | iling only apply to certain territory (terr | ritories) or certain classes? If so, specify: | |
| Does finds | lling only apply to certain territory (territory) | ates of an advisory organization, specify obility Loss Cost, ILF & revisted LC | |
| Does finds | ling only apply to certain territory (territory only apply to certain territory (territory only apply to certain territory) (less right) essentially apply to adopt ISO's General Liably apply to reflect all prior rate changes. | ates of an advisory organization, specify obility Loss Cost, ILF & revisted LC | |
| Does fi
No
Brief d
We | ling only apply to certain territory (territory only apply to certain territory (territory only apply to certain territory) (less right) essentially apply to adopt ISO's General Liably apply to reflect all prior rate changes. | ates of an advisory organization, specify obility Loss Cost, ILF & revisted LC | |
| Does finds | ling only apply to certain territory (territory only apply to certain territory (territory only apply to certain territory) (less right) essentially apply to adopt ISO's General Liably apply to reflect all prior rate changes. | ates of an advisory organization, specify of bility Loss Cost, ILF & revisted LC | |
| Does finds | ling only apply to certain territory (territory only apply to certain territory (territory only apply to certain territory) (less right) essentially apply to adopt ISO's General Liably apply to reflect all prior rate changes. | ates of an advisory organization, specify of bility Loss Cost, ILF & revisted LC ch will Firem. Willia | an's Fund Insurance Co. Name of Company m Paukovitz, |
| Does finds | ling only apply to certain territory (territory only apply to certain territory (territory only apply to certain territory) (less right) essentially apply to adopt ISO's General Liably apply to reflect all prior rate changes. | ates of an advisory organization, specify of bility Loss Cost, ILF & revisted LC ch will Firem. Willia | an's Fund Insurance Co. Name of Company |

| Change in Company's premium or rate level produced by rate revision effective | | May 1, 2015 | |
|---|---|--|-----------------------------|
| | (1) | (2) Annual Premium | (3) Percent |
| | Coverage | Volume (Illinois)* | Change (+ or -)** |
| | obile Liability
ommercial | | |
| 2. Autom | obile Physical Damage
ommercial | | |
| 3. Liabilit | y Other Than Auto | \$478,984 | +9.2% |
| 4. Burgla | ry and Theft | | |
| Glass | | | |
| Fidelity | , | | |
| Surety | | | |
| | and Machinery | | <u> </u> |
| 9. Fire | | | |
| | ed Coverage | | |
| 11. Inland | | | |
| 12. Homeo | | | |
| | ercial Multi-Peril | | <u> </u> |
| 14. Crop H | | <u></u> | |
| 15. Other | | | |
| | Line of Insurance | | |
| Does filing | only apply to certain territor | y (territories) or certain classes? If so, specif | y: |
| All terr | itories and classes | | |
| | | ows rates of an advisory organization, specify
014-115) and revise loss cost multipliers with | |
| | | | |
| | o reflect all prior rate chang
in Company's premium leve | I which will result from application of new rate | |
| | | | erty Insurance Corporation |
| | | N | Name of Company |
| | | Tammy Palm | bach, Product Technician II |
| | | | Official - Title |

| Change in Company's premium or rate level produced by rate revision effective | | May 1, 2015 | |
|---|--|---|-------------------------------------|
| | (1)
Coverage | (2)
Annual Premium
Volume (Illinois)* | (3)
Percent
Change (+ or -)** |
| | Coverage | voidifie (filinois) | Change (+ or -) |
| 1. | Automobile Liability
Commercial | | |
| 2. | Automobile Physical Damage
Commercial | | |
| 3. | Liability Other Than Auto | \$2,108,322 | +12.4% |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| 10. | Extended Coverage | | |
| 11. | Inland Marine | | |
| 12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other | | |
| | Line of Insurance | | |
| | | | |
| | | ry (territories) or certain classes? If so, specify | /: <u> </u> |
| | All territories and classes | | |
| | | lows rates of an advisory organization, specify | |
| | Adopt ISO loss costs (circular GL-2 | 2014-115) and revise loss cost multipliers with | an effective date of 5/1/2015. |
| | | | |
| | | •••• | |
| | | | |
| | usted to reflect all prior rate chang | | |
| ** CI | hange in Company's premium leve | l which will result from application of new rate | S. |
| | | | |
| | | | Insurance Corporation |
| | | N | ame of Company |
| | | | |
| | | Tammy Palm | bach, Product Technician II |
| | | | Official - Title |

| Cha | ange in Company's premium or rat | e level produced by rate revision effective | May 1, 2015 |
|------|--|---|---------------------------------------|
| | (1) | (2)
Annual Premium | (3)
Percent |
| | Coverage | Volume (Illinois)* | Change (+ or -)** |
| 1. | Automobile Liability Commercial | | |
| 2. | Automobile Physical Damage
Commercial | | |
| 3. | Liability Other Than Auto | \$13,651,622 | +8.5% |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | <u> </u> | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | —————————————————————————————————————— | |
| | Extended Coverage | | · · · · · · · · · · · · · · · · · · · |
| | Inland Marine | | - |
| | Homeowners | | |
| | Commercial Multi-Peril | | - |
| | Crop Hail | _ | |
| | Other | | |
| 10. | Line of Insurance | | |
| | | | |
| Doe | es filing only apply to certain territo | ory (territories) or certain classes? If so, specify: | |
| | All territories and classes | , (,,,, - ₋ , | |
| | | | |
| Brie | ef description of filing> (If filing fo | ollows rates of an advisory organization, specify o | organization): |
| | | -2014-115) and revise loss cost multipliers with a | |
| | • | • | |
| | | | |
| | | | |
| *Ad | ljusted to reflect all prior rate char | nges. | |
| | | vel which will result from application of new rates | • |
| | | • • | |
| | | Liberty Mutua | l Fire Insurance Company |
| | | | ime of Company |
| | | | • |
| | | Tammy Palmb | ach, Product Technician II |
| | | | Official - Title |

| Change in Company's premium or r | ate level produced by rate revision effective | May 1, 2015 |
|--|---|---------------------------------------|
| (1) | (2)
Annual Premium | (3)
Percent |
| Coverage | Volume (Illinois)* | Change (+ or -)** |
| Automobile Liability Commercial | _ | |
| 2. Automobile Physical Damage Commercial | | |
| 3. Liability Other Than Auto | \$225,795 | +14.6% |
| 4. Burglary and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other | <u> </u> | |
| Line of Insurance | | |
| Does filing only apply to certain ter | ritory (territories) or certain classes? If so, specify | |
| All territories and classes | intory (territories) of certain classes: If so, specify | · |
| | | |
| | follows rates of an advisory organization, specify | |
| Adopt ISO loss costs (circular C | GL-2014-115) and revise loss cost multipliers with a | an effective date of 5/1/2015. |
| | | |
| | | |
| ************************* | | |
| *Adjusted to reflect all prior rate ch | | _ |
| ** Change in Company's premium | evel which will result from application of new rates | 5. |
| | t ile corte title | tual Incompany Company |
| | | tual Insurance Company ame of Company |
| | (1) | вше от соттрату |
| | Tammy Palmi | oach, Product Technician II |
| | | Official - Title |
| | | Official TIDE |

| Change in Company's premium or rate level produced by rate revision effective | | May 1, 2015 | |
|---|--|--|-------------------------------|
| | (1) | (2) | (3) |
| | (-) | Annual Premium | Percent |
| | Coverage | Volume (Illinois)* | Change (+ or -)** |
| 1. Au | tomobile Liability
Commercial | | |
| 2. Au | tomobile Physical Damage
Commercial | | |
| 3. Lia | bility Other Than Auto | \$1,158,404 | +9.5% |
| 4. Bu | rglary and Theft | | |
| 5. Gla | iss | · • • • • • • • • • • • • • • • • • • • | |
| 6. Fid | elity | | |
| 7. Sui | rety | | |
| 8. Boi | ler and Machinery | | |
| 9. Fire | 2 | | |
| 10. Ext | ended Coverage | | ··· |
| 11. Inla | and Marine | | |
| 12. Ho | meowners | | |
| 13. Co | mmercial Multi-Peril | | |
| 14. Cro | p Hail | | |
| | ner | | |
| | Line of Insurance | | |
| | | | |
| Does fil | ing only apply to certain territo | ry (territories) or certain classes? If so, specify: | |
| All | territories and classes | | |
| | | | |
| | | lows rates of an advisory organization, specify o | |
| Add | opt ISO loss costs (circular GL- | 2014-115) and revise loss cost multipliers with a | n effective date of 5/1/2015. |
| | | <u> </u> | |
| | | | |
| | | | |
| | ed to reflect all prior rate chan | | |
| ** Char | ige in Company's premium leve | el which will result from application of new rates. | |
| | | | - ·· |
| | | | urance Corporation |
| | | Na | me of Company |
| | | Tammy Balmh | ach, Product Technician II |
| | | | Official - Title |
| | | | Jinciai - Iluc |

Revised

FORM (RF-3)

SUMMARY SHEET

| (1) | (2)
Annual Premium | (3)
Percent |
|--|---|-----------------------------|
| Coverage | Volume (Illinois) * | Change (+or-) ** |
| Automobile Liability Private | | |
| Passenger | | |
| Commercial | | |
| Automobile Physical Damag | | |
| Prîvate Passenger | | |
| Commercial | | |
| Liability Other Than Auto | 2,058,784 | 0.001% increase |
| Burglary and Theft | | |
| Glass | | |
| Fidelity | | |
| Surety | | |
| Boiler and Machinery | | |
| Fire | | |
| Extended Coverage | | |
| Inland Marine | | |
| Homeowners | | |
| Commercial Multi-Peril | | |
| Crop Hail | | |
| Other | | |
| Life of Insurance | | |
| Does filing only apply to cert
Classes? If so, | | |
| | ges do not apply to a certain te | erritory or territories or |
| certain Classes | | |
| Brief description of filing. (If Organization, specify | filing follows rates of an a | advisory |
| organization): | Amending caps in two | Area of Practice categories |

Name of Company
Terry Bliss, CPCU, ARP Compliance Manager
Official – Title

^{**}Change in Company's premium level which will result from application of new rates.

FORM (RF-3)

| (1) | (2) Annual Premium | (3)
Percent |
|---|---|--|
| Coverage | Volume (Illinois) * | Change (+or-) ** |
| Automobile Liability Private | | |
| Passenger | | |
| Commercial | | |
| Automobile Physical Damag | | |
| Private Passenger Commercial | | |
| | 14,347 | 40.5 |
| Liability Other Than Auto Burglary and Theft | 14,547 | -12.5 |
| Glass | ····· | |
| Glass
Fidelity | | 4.471 |
| Surety | ************************************** | |
| Boiler and Machinery | · · · · · · · · · · · · · · · · · · · | |
| Fire | | |
| Extended Coverage | Make Market and an address of the second of | |
| Inland Marine | | |
| Homeowners | | |
| Commercial Multi-Peril | | |
| Crop Hail | | |
| Other | | |
| Life of Insurance | | THE MANAGEMENT OF THE PROPERTY |
| Does filing only apply to cert Classes? If so. | ain territory (territories) or | certain |
| specify: NO | | |
| specify. | <u> </u> | |
| Brief description of filing. (If | filing follows rates of an a | dvisorv |
| Organization, specify | <u> </u> | • |
| organization): | Adopting ISO rules | |
| | | |
| | | |
| *Adjusted to reflect all prior r **Change in Company's prer | | It from application of ne |
| rates. | National Fire ar | d Indemnity Exchange |
| | | |
| | | me of Company |
| | · · · · · · · · · · · · · · · · · · · | |

| (| Change in Company's premium or rate l | evel produced by rate revision effective | 05/01/2015 |
|-------------------|--|--|--|
| | (1)
<u>Coverage</u> | (2) Annual Premium Volume (Illinois)* | (3) Percent <u>Change (+ or -)**</u> |
| 1. | Automobile Liability Private Passenger Commercial | | |
| 2. | Automobile Physical Damage
Private Passenger
Commercial | | |
| 3. | Liability Other Than Auto | 1,783,157 | -2.7 |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9.
10. | Fire Extended Coverage | | |
| 11. | Inland Marine | | |
| 12 | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other | | |
| | | ates of an advisory organization, specify bility Loss Cost, ILF & revisted L | |
| ** C I | djusted to reflect all prior rate changes. nange in Company's premium level which sult from application of new rates. | ch will | |
| | | Nati | onal Surety Corporation.
Name of Company |
| | | | iam Paukovitz,
Compliance
Official - Title |

FORM (RF-3)

SUMMARY SHEET

| Change in Company's premium or rate | e level produced by rate revision |
|-------------------------------------|-----------------------------------|
| effective June 1, 2015 . | · |

| | (1) | (2)
Annual Premium | (3)
Percent |
|----------------------|--|---|--|
| | Coverage | Volume (Illinois) * | Change (+or-) ** |
| • | Automobile Liability Private | | |
| | Passenger | *************************************** | |
| | Commercial | | |
| | Automobile Physical Damag | | _ |
| | Private Passenger | | 400400040444444444444444444444444444444 |
| | Commercial | | |
| • | Liability Other Than Auto | 119,100 | +0.10% |
| • | Burglary and Theft | | |
| • | Glass | | Walter the state of the state o |
| • | Fidelity | | |
| - | Surety | | |
| • | Boiler and Machinery | | |
| 0. | Fire | | |
| u.
1. | Extended Coverage | 400MHP 10-25 | |
| ι.
2. | Inland Marine | | |
| 2.
3. | Homeowners Commercial Multi-Peril | | |
| ა.
4. | Crop Hail | | *************************************** |
| 1 .
5. | Other | | |
| <i>J</i> . | Line of Insurance | | |
| • | Does filing only apply to certa Classes? If so, specify: | in territory (territories) or | certain |
| | | | |
| | Brief description of filing. (If fi | ling follows rates of an a | dvisory |
| | Organization, specify organization): | The company is edenting | ISO rule revision GL-2014-RDD14, |
| | Deductible Discount Factors | The company is adopting | 13O fale revision GL-2014-RDD 14, |
| | Deductible Discoult Factors | <u> </u> | |
| | *Adjusted to reflect all prior ra **Change in Company's prem | | It from application of new |
| | rates. | Nova Casualty Co | mnany |
| | | | |
| | | inai | me of Company |

Susan E. Allen, Vice President, Product

Official - Title

FORM (RF-3)

| | (1)
Coverage | (2) Annual Premium Volume (Illinois) * | (3) Percent Change (+or-) ** |
|---|---|--|---|
| • | Automobile Liability Private | VOIDTIC (IIII 1013) | - Onange (101-) |
| | Passenger | | |
| | Commercial | | |
| | Automobile Physical Damag | | |
| | Private Passenger | | • |
| | Commercial | | |
| | Liability Other Than Auto | 57,824 | -0.43% |
| | Burglary and Theft | | 3,10,0 |
| | Glass | | |
| | Fidelity | | |
| | Surety | 11121 | |
| | Boiler and Machinery | | |
| | Fire | ************************************** | |
| | · · · = | | |
| | Extended Coverage Inland Marine | ************************************** | |
| | | | |
| | Homeowners | | |
| | Commercial Multi-Peril | ** *********************************** | |
| | Crop Hail | | |
| | Other Life of Landson | | |
| | Life of Insurance | | |
| | Does filing only apply to certa Classes? If so, | in territory (territories) or | certain |
| | specify: NA | | |
| | | | |
| | Brief description of filing. (If f | iling follows rates of an a | dvisory |
| | Organization, specify | | |
| | organization): | The purpose of this filing i | s to adopt the following ISO |
| | designations CL-2013-OUtiRU, GL-2006-IALL1, GL-20 | | |
| | QU-2019-6011, QU-2010-MALE1, QL-2019-OCT (0. QL-2019-OELP1, QL- | | 1, 01-2012-0RU12, 91-2012-ROTEO, 61-2013-8-911, RP-2014-R |
| | *Adjusted to reflect all prior ra **Change in Company's prem | | It from application of new |
| | rates. | Sentry Select Insu | rance Company |
| | | | |
| | | | |
| | | Na | me of Company
e President Chief Actuary |

-Revised -

FORM (RF-3)

SUMMARY SHEET

| | (1) | (2)
Annual Premium | (3)
Percent |
|------------------|---|--|--|
| | Coverage | Volume (Illinois) * | Change (+or-) ** |
| Autor | nobile Liability Private | | |
| Passe | | | |
| Comr | mercial | | |
| Auton | nobile Physical Damag | | |
| Privat | e Passenger | | |
| Comn | nercial | | |
| Liabili | ty Other Than Auto | 309,632 | -1.5% |
| | ary and Theft | | |
| Glass | • | | |
| Fidelil | tv | | |
| Surety | v | | |
| - | and Machinery | the state of the s | |
| Fire | | B | |
| | ded Coverage | | |
| | I Marine | | |
| | owners | | |
| | nercial Multi-Peril | | |
| Crop | | | |
| Other | | | |
| | Line of Insurance | | |
| Class | ses? If so, | ain territory (territories) or | certain |
| speci | fy: N/A | | |
| Brief | description of filing. (If) | filing follows rates of an a | dvisory |
| | nization, specify | 9 10.10110 10.00 01 01.10 | a |
| Orgai | | | |
| | nization): | | |
| orgar | nization);
on of ISO Increased Limits Facto | rs - GL-2014-IALL1 | |
| orgar | nization);
on of ISO Increased Limits Factor | s - GL-2014-IALL1 | |
| Adoptio
*Adju | sted to reflect all prior range in Company's pren | ate changes. | It from application of new |
| Adoption*Adju | sted to reflect all prior range in Company's pren | ate changes.
nium level which will resu | • • |
| Adoptio
*Adju | sted to reflect all prior range in Company's pren | ate changes.
nium level which will resu
Transguard Insura | It from application of new nce Company of America, Income of Company |

Official - Title

| Change in Company's premium or rate level produced by | y rate revision effective May 1, 2015 | |
|---|---|---|
| (1) | (2) | |
| | nual Premium Percent | |
| | ume (Illinois)* Change (+ or -)** | |
| Automobile Liability Commercial | | |
| Automobile Physical Damage Commercial | | |
| 3. Liability Other Than Auto | \$471,904 +13.3% | |
| 4 Ruralany and Theft | | |
| 5. Glass | | |
| 6. Fidelity | | |
| 7. Surety | | |
| 8. Boiler and Machinery | | |
| 9. Fire | | |
| 10. Extended Coverage | | |
| 11. Inland Marine | | |
| 12. Homeowners | | |
| 13. Commercial Multi-Peril | | |
| 14. Crop Hail | | |
| 15. Other | | |
| Line of Insurance | , | |
| | | |
| | certain classes? If so, specify: | |
| All territories and classes | | |
| Brief description of filing> (If filing follows rates of an a | advisory organization, specify organization):
vise loss cost multipliers with an effective date of 5/1/2015. | |
| Adopt 130 1033 CO3CS (Circular Oc 2011 113) and 104 | vise 1033 cose mataphers with an effective date of 5/1/2013. | |
| | · · · | |
| | | _ |
| *Adjusted to reflect all prior rate changes. | | |
| ** Change in Company's premium level which will result | t from application of new rates | |
| Change in company 5 premiant level which will result | t from application of fless faces. | |
| | Wausau Business Insurance Company | |
| | Name of Company | |
| | name or company | |
| | Tammy Palmbach, Product Technician II | |
| | Official - Title | _ |

| Change in Company's premium or rate level produced by rate revision effective | | May 1, 2015 | |
|---|--|-------------------------------|--|
| (1) | (2)
Annual Premium | (3)
Percent | |
| Coverage | Volume (Illinois)* | Change (+ or -)** | |
| Automobile Liability Commercial | | | |
| 2. Automobile Physical Damage
Commercial | | | |
| 3. Liability Other Than Auto | \$1,962,026 | +6.7% | |
| Burglary and Theft | | | |
| 5. Glass | | | |
| 6. Fidelity | | | |
| 7. Surety | | | |
| 8. Boiler and Machinery | | | |
| 9. Fire | | | |
| 10. Extended Coverage | | | |
| 11. Inland Marine | | | |
| 12. Homeowners | | | |
| 13. Commercial Multi-Peril | | | |
| 14. Crop Hail | | | |
| 15. Other | | | |
| Line of Insurance | | | |
| D 616 1 1. h 1. h 1. | (titi)t-i | _ | |
| | ory (territories) or certain classes? If so, specify | <u> </u> | |
| All territories and classes | | | |
| Priof description of filing \ (If filing for | ollows rates of an advisory organization, specify (| organization): | |
| | -2014-115) and revise loss cost multipliers with a | | |
| Adopt 150 loss costs (circular GL | -2014-115) and revise loss cost multipliers with a | in enective date of 3/1/2013. | |
| | | | |
| | | | |
| *Adjusted to reflect all prior rate char | 2005 | | |
| | rel which will result from application of new rates | • | |
| Change in Company's premium lev | ret which will result from application of new rates | • | |
| | Waucau Under | writers Insurance Company | |
| | | ame of Company | |
| | • | and an admiranty | |
| | Tammy Palmi | oach, Product Technician II | |
| | Tarini Tarini | Official - Title | |
| | | | |